



## **Application Data Sheet**

### **Application Information**

Application Number::	10/589,000
Filing Date::	August 10, 2006
Application Type::	National Phase
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	0
Number of copies of CDs::	0
Sequence submission?::	No
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	COMPOSITIONS FOR TREATMENT OF CANCER AND INFLAMMATION WITH CURCUMIN AND AT LEAST ONE NSAID
Attorney Docket Number::	27627U
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	19

Small Entity?: No

Latin name:

Variety denomination name:

Petition included?: No

Petition Type: N/a

Licensed U.S. Govt. Agency: N/a

Contract or Grant Numbers: N/a

Secrecy Order in Parent Appl.?: No

### **Applicant Information (1)**

Applicant Authority type: Inventor

Primary Citizenship Country: IL

Status: Full Capacity

Given Name: Nadir

Middle Name:

Family Name: ARBER

Name Suffix:

City of Residence: Tel Aviv

State or Province of Residence:

Country of Residence: IL

Street of Mailing address: 11 Barazani St. # 11

City of mailing address: Tel Aviv

State/Province of mailing address::

Country of mailing address:: IL

Postal Code of mailing address:: 69121

## **Applicant Information (2)**

Applicant Authority type:: Inventor

Primary Citizenship Country:: IL

Status:: Full Capacity

Given Name:: Shahar

Middle Name::

Family Name:: LEV-ARI

Name Suffix::

City of Residence:: Tel Aviv

State or Province of Residence::

Country of Residence:: IL

Street of Mailing address:: Hisin 14

City of mailing address:: Tel Aviv

State/Province of mailing address::

Country of mailing address:: IL

Postal Code of mailing address:: 64284

**Applicant Information (3)**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: IL  
Status:: Full Capacity  
Given Name:: Dov  
Middle Name::  
Family Name:: LICHTENBERG  
Name Suffix::  
City of Residence:: Tel Aviv  
State or Province of Residence::  
Country of Residence:: IL  
Street of Mailing address:: 21 Hazohar Street  
City of mailing address:: Tel Aviv  
State/Province of mailing address::  
Country of mailing address:: IL  
Postal Code of mailing address:: 62507

**Correspondence Information**

Correspondence Customer Number:: 20529  
Name:: THE NATH LAW GROUP  
Street of mailing address:: 112 S. West Street  
City of mailing address:: Alexandria

State or Province of mailing address:: Virginia

Country of mailing address:: United States of America

Postal or Zip Code of mailing address:: 22314

Phone number:: (703) 548-6284

Fax number:: (703) 683-8396

E-Mail address:: ip@nathlaw.com

### Representative Information

Representative Customer Number::	20529
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### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date (MM/DD/YY) ::
This Application	National Stage of	PCT/IL2005/000173	02/10/05
PCT/IL2005/000173	An application claiming the benefit under 35 USC 119(e)	60/543,389	02/11/04

### Foreign Priority Information

Country::	Application Number::	Filing Date:: (MM/DD/YY)	Priority Claimed::

### Assignee Information (1)

Assignee name:: RAMOT AT TEL-AVIV UNIVERSITY LTD.

Street of mailing address:: 32 Haim Levanon Street

City of mailing address:: Tel Aviv

State/Province of mailing address::

Country of mailing address:: IL

Postal Code of mailing address:: 69975

**Assignee Information (2)**

Assignee name:: MEDICAL RESEARCH FUND AT THE  
TEL AVIV SOURASKY MEDICAL  
CENTER

Street of mailing address:: 6 Weitzman Street

City of mailing address:: Tel Aviv

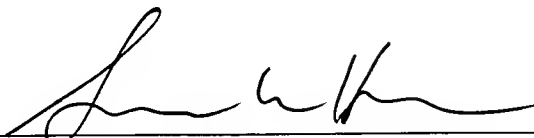
State/Province of mailing address::

Country of mailing address:: IL

Postal Code of mailing address:: 64239

**Signature**

Signature::



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First Name:: Susanne M. Last Name:: Hopkins

Registration No.: 33,247 Date (MM/DD/YY): 04/6/09